





THE BLACK HISTORY POSTER PROJECT

APPLICATION FORM

Legal Name			
Professional Name (if appli	icable)		
Address			
City	State	Zip code	Ward#
Daytime Phone			
,,			
Email Address		Website	
Applicant Signature		Date	

ANNOTATED IMAGE LIST

Image numbers must correspond to the accompanying work sample number.

2.	Title: Description: Location: Materials/Media: Dimensions: Year: Budget/Price:
3.	Title: Description: Location: Materials/Media: Dimensions: Year: Budget/Price:
4.	Title: Description: Location: Materials/Media: Dimensions: Year: Budget/Price:
5.	Title: Description: Location: Materials/Media: Dimensions: Year: Budget/Price:
6.	Title: Description: Location: Materials/Media: Dimensions: Year:

Budget/Price:

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Description: Location:

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Location:

Materials/Media:

Dimensions:

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8. Title:

Description:

Location:

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9. Title:

Description:

Location:

Materials/Media:

Dimensions:

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Budget/Price:

10. Title:

Description:

Location:

Materials/Media:

Dimensions:

Year:

Budget/Price: